

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2004

Application or Docket Number

			_	[0]	DI	8672							
		CLAIMS	(Column 1)		(Column 2)		SMALL ENT		YTITY	OR		OTHER THAN MALL ENTITY	
TOTAL CLAIMS								RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE		OR	BASIC FEE	300	
TOTAL CHARGEABLE CLAIMS			9 minus 20 =		•			X\$9=		OR	X \$ 18 =	200	
INDEPENDENT CLAIMS			3 minus 3 =		•			X \$ 44 =		OR	X \$ 88 =	400	
MUL	TIPLE DEPEN	DENT CLAIM P	RESENT					+ \$ 150 =		OR	+ \$ 300 =	7.00	
* If the difference in column 1 is less than zero, enter "0" in column 2							• 1	TOTAL		OR	TOTAL	900	
12.16-0CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT A	Total	·a	Minus	2	ර	=		~X-\$-9	Name of Street, or other Desired	OR	X \$ 18 =		
AME	Independent	3	Minus			-)	- Contraction	X.\$.44.=-		-0R	X-\$ 88 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 150 =		OR	+ \$ 300 =		
								TOTAL ADDIT FFF		OR	TOTAL ADDIT FFF		
		(Column 1)		(Colu		(Column 3)				1 1	يحضا		
NT B		REMAINING AFTER AMENDMENT		NUM PREVIO	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	•	Minus	**		3		X\$9=		OR	X \$ 18 =		
AME	Independent	•	Minus	***		=	l	X \$ 44 =		OR	X \$ 88 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 150 =		OR	+ \$ 300 =		
								TOTAL ADDIT FFF		OR	TOTAL ADDIT FFF		
_		(Column 1) CLAIMS		(Cotur		(Column 3)							
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM: PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X \$ 9 =		QR	X \$ 18 =		
	Independent	•	Minus	***		=		X \$ 44 =		OR	X \$ 88 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 150 =		OR	+ \$ 300 =		
TOTAL ADDIT FFF If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".													
***	If the "Highest Nu	mber Previously P mber Previously P aber Previously Pa	aid For IN THIS	SPACE IS I	ess than	'3', enter "3".	and in t	he appropriate	box in colum	n 1.			